PTO/SB/05 (08-03)

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UTILITY PATENT APPLICATION

Attorney Docket No. A8319.0038/P038-A First Inventor Shinichi Kojima

TRANSMITTAL	Title	RADIOLOGICAL IMAGING APPARATUS						
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Current	Additional Ale						
	Expres	ss Mail Label No.						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages 12] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Summary of the Drawings (if filed) - Detailed Description - Claim(s)	5]	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement						
	- Abstract of the Disclosure (when there is an assignee) Attorney							
	6 1 5 1	11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS						
	, i	Statement (IDS)/PTO-1449						
a. Newly executed (original or copy)	13. X Preliminary Amendment 14 Preliminary Amendment 17 Return Receipt Postcard (MPEP 503)							
b. X Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)		(Should be specifically itemized)						
i. DELETION OF INVENTOR(S)		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.						
		17. Other:						
6. Application Data Sheet. See 37 CFR 1.76								
18. If a CONTINUING APPLICATION, check appropriate box, specification following the title, or in an Application Data Sheet	and supp	oly the requisite information below and in the first sentence of the						
		CIP) of prior application No.: 10/270,151						
Prior application information: Examiner Not Ye	t Assio							
For CONTINUATION OR DIVISIONAL APPS only: The entire	disclosu	ure of the prior application, from which an oath or declaration is supplied						
under Box 5b, is considered a part of the disclosure of the according reference. The incorporation can only be relied upon when a p	ompanyin ortion has	ng continuation or divisional application and is hereby incorporated by s been inadvertently omitted from the submitted application parts.						
		ONDENCE ADDRESS						
X Customer Number: 24998		OR X Correspondence address below						
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Signature	mas	1		Date	Ap	oril 2, 2004

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PTO/SB/17 (10-03)

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			Complete if Known						
FEE TRANSMITTAL	.	Application Number NOT YET ASSIGNED							
for FY 2004	Filing Date			April 2, 2004					
		First Named Inventor			ntor	Shinichi Kojima			
Effective 10/01/2003, Patent fees are subject to annual revision.		Exam	iner N	ame		Not Yet A	ssigned		
Applicant claims small entity status. See 37 CFR 1.27		Art Unit			N/A				
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Attorney Docket No. A8319.0038/P038-A				38/P038-A			
METHOD OF PAYMENT (check all that apply)		•		FEE	CALCUI	LATION (co	ntinued)		
Check X Credit Money Other None	3 4	DDITI	ONAL	FEES			•		
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Number	Code	(\$)	Code	(\$)		Fee Desc	ripuon	Fee Paid	
Deposit Account Dickstein Shapiro Morin &	1051	130	2051	65	Surcharge	- late filing fe	e or oath		
Name Oshinsky LLP	1052	50	2052	25		- late provision	onal filing fee or cover		
The Director is authorized to: (check all that apply)					sheet.			\vdash	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Englis	sh specification	n		
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a	request for ex p	parte reexamination		
Charge fee(s) indicated below, except for the filling fee	1804	920*	1804	920*	Requesting Examiner a	g publication o action	f SIR prior to		
to the above-identified deposit account.	1805	1,840*	1805	1,840*		esting publication of SIR after			
FEE CALCULATION	1251	110	2251	55		for reply within	first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension t	for reply within	second month		
Large Entity Small Entity	1253	950	2253	475	Extension	for reply within	third month		
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension	for reply within	fourth month		
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255	1,005	Extension t	for reply within	i fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A	ppeal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brid	ef in support o	f an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request fo	r oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451				lic use proceeding		
SUBTOTAL (1) (\$) 770.00	1452	110	2452	55		Petition to revive – unavoidable			
	1453 1501	1,330	2453 2501	665	Petition to revive - unintentional Utility issue fee (or reissue)				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501	1,330 480	2501	665	•	,	iej	-	
Claims below Fee Paid	l		2502	240	Design issu				
Total Claims 13 -20** = x = 0.00	1503 1460	640 130	1460	320 130	Plant issue	the Commiss	ioner		
Claims 3 -3 = X = 0.00	l								
Multiple Dependent	1807	50	1807	50	_	fee under 37	• • •	<u> </u>	
Large Entity Small Entity	1806	180	1806	180			n Disclosure Stmt ssignment per		
Fee Fee Fee Fee Fee Fee Description	8021	40	8021	40		mes number o			
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385			final rejection		
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	(37 CFR 1.129(a)) For each additional invention to be					
1203 290 2203 145 Multiple dependent claim, if not paid	l		l		examined (37CFR 1.129(b))				
1204 86 2204 43 ** Reissue independent claims over original patent	1801	Possest for expedited examination							
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	of a design application						<u> </u>	
	l	Other fee (specify)							
SUBTOTAL (2) (\$) 0.00	*Redu	uced by	Basic F	iling Fee	Paid	SUBTO	TAL (3) (\$)	0.00	
**or number previously paid, if greater; For Reissues, see above SUBMITTED BY (Complete (if applicable))									
SUBMITTED BY	Regist	ration No).]22	000		T			
Name (Print/Type) Mark J. Thronson		ey/Agent		,082		Telephone	(202) 775-4742		
Signature MA	~					Date	April 2, 2004		